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Fill in this inform	nation to identif	y your case:			
Debtor 1	Jesse		Davis		
	First Name	Middle Name	Last Name	Che	ck if this is:
Debtor 2	Ebony		Davis	— M	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name		7 th amended ming
United States Bankruptcy Court for the:		EASTERN DIST. OF PENNSYLVANIA		_ 🗆	A supplement showing postpetition chapter 13 income as of the following date:
Case number	2020-13888				onapter to income as of the following date.
(if known)					MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Emplo	oyment						
Fill in your employment information. If you have more than one		Debtor 1			Debtor 2 or non-	filing spou	se
job, attach a separate page with information about	Employment status	✓ Employed☐ Not employed		✓ Employed☐ Not employed			
additional employers.	Occupation	Program Manager		Sr. Business Analyst			
Include part-time, seasonal, or self-employed work.	Employer's name	Sikosrky Aircrat	t		Compunell Sof	tware Gro	oup, Inc.
Occupation may include student or homemaker, if it applies.	Employer's address	110 Stewart Huston Dr. Number Street			103 Morgane Lane #102 Number Street		
		Coatesville	PA State	19320 Zip Code	Plainsboro City	NJ State	08536 Zip Code
	How long employed th			_	<u>2 mos.</u>		_

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$9,686.60	\$9,533.33
3.	Estimate and list monthly overtime pay.	3	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$9,686.60	\$9,533.33

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Debtor 1 **Jesse Davis** Debtor 2 **Ebony Davis** Case number (if known) 2020-13888 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$9,686.60 \$9,533.33 List all payroll deductions: \$2,407.84 \$1,950.56 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. 5c. \$774.92 \$0.00 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. \$247.08 \$0.00 \$272.20 \$0.00 5e. Insurance 5e. 5f. \$0.00 \$0.00 5f. Domestic support obligations 5q. Union dues 5g \$0.00 \$0.00 5h. Other deductions. \$815.41 \$5.72 5h. + Specify: See continuation sheet / PA Unemployment Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. **\$4,517.45** \$1,956.28 5g + 5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$7,577.05 \$5,169.15 List all other income regularly received: 8a. 8a. Net income from rental property and from operating a (\$556.58) \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a 8c. \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation hß \$0.00 \$0.00 8e. Social Security 8e \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 \$0.00 8g. 8g. Pension or retirement income \$0.00 \$0.00 Other monthly income. Specify: 8h. 4 \$0.00 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. (\$556.58) \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$4,612.57 \$7,577.05 \$12,189.62 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$12,189.62 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? ☐ No. Debtor has been hired as direct permanent employee of a company, and will cease contract work in the near future. Pay is from contract agency. Yes. Explain:

Debtor 1 Jesse Davis

Debtor 2 Ebony Davis Case number (if known) 2020-13888

. Other Payroll Deductions (details)	For Debtor 1	For Debtor 2 or non-filing spouse
PA Sadsbury TWP Withholding / PA Unemployment	\$89.84	\$5.72
PA Sadsbury TWP Local Svc. Tax	\$4.00	
PA Unemployment EE	\$5.56	
HSA	\$400.00	
EE Special Accident	\$18.48_	
Spouse Special Accident	\$12.92	
ARAG Legal Insurance	\$17.52	
Info Armor ID Theft	\$16.56	
Long term Disability	\$24.88_	
Dep Opt'l Term Life- Spouse	\$9.93_	
EE Group Universal Life	\$6.76	
GUL Cash ACc Fund EE	\$100.00	
Accient Insurance	\$27.64	
Critical Illness	\$33.68_	
Hospital Indemnity	\$47.64	
То	otals:\$815.41	\$5.72

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Debtor 1 Jesse Davis

Debtor 2 Ebony Davis Case number (if known) 2020-13888

8a. Attached Statement (Debtor 1)

CT residence - current rental property

Gross Monthly Income: \$0.00

ExpenseCategoryAmountConnecticut WaterUtilities\$120.00

Septic Service Utilities \$21.58
Terminex Maintenance \$40.00
Yard-grounds Labor \$150.00
Management Fees Professional Fees \$100.00

Feed, fertilizer, yard

Mortgage installment

Professional Fees

\$100.00

Cost of Maintenance of Pr

Rent

\$0.00

Total Monthly Expenses \$556.58

Net Monthly Income: (\$556.58)

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